HOSPITAL BEDS STANDARD ADVISORY COMMITTEE (HBSAC) MEETING

Wednesday, February 22, 2006

Capitol View Building 201 Townsend Street MDCH Conference Room B/C Lansing, MI 48913

APPROVED MINUTES

I. Call to Order.

Chairperson Ball called the meeting to order at 9:10 a.m.

a. Members Present and Organizations Represented:

Robert Asmussen, St. John Health System
James Ball, Michigan Manufacturers Association
Barton P. Buxton, McLaren Health Care
Wayne Cass, Michigan State AFL-CIO
Connie Cronin, H.F. Health System
Dr. Douglas Edema, Trinity Health
James Falahee, Jr., Bronson Healthcare Group
A. Michael LaPenna, Alliance for Health
Robert Meeker, Spectrum Health (Alternate)
Mark Mailloux, University of Michigan Health System
Sharon Miller, Small Business Association of Michigan (Alternate)
Patrick O'Donovan, Beaumont Hospitals
Patricia Richards, Health Alliance Plan
Dale Steiger, Blue Cross Blue Shield of Michigan
Mary Zuckerman, Detroit Medical Center

b. Members Absent and Organizations Represented:

Gary Kushner, Small Business Association of Michigan William Rietscha, Spectrum Health

c. Staff Present:

Tom Freebury Bill Hart John Hubinger Joette Laseur Irma Lopez Jeff McManus Andrea Moore Stan Nash Brenda Rogers

II. Introduction of Members and Staff.

Each Committee and staff member introduced himself or herself and identified their represented organization.

III. Review of Agenda and Distributed Materials.

Chairperson Ball reviewed the agenda. Motion by Mr. Buxton, seconded by Mr. Meeker, to accept the Agenda as presented. Motion Carried.

IV. Conflicts of Interests.

No conflicts were noted.

V. Review of Charge.

Ms. Rogers reviewed the Charge with the Committee (Attachment A).

VI. Presentation of Michigan State University, Department of Geography.

Mr. Joe Messina and Mr. Ashton Shortridge provided an oral and slide presentation. Committee members will receive copies of the presented material via an email. Discussion followed.

Break from 10:45 a.m. - 11:05 a.m.

VII. Discussion of Charge.

Chairperson Ball requested that the Committee divide into workgroups to make recommendations to the Committee on each charge. The workgroups will convene outside of SAC meetings with no more than seven (7) SAC members (regular and/or alternates) present. Each workgroup is to set their own dates, times, and location for each meeting. Notice will be given to the Department to allow for posting on the website. The Committee participation is as follows:

Charge One Workgroup
Dale Steiger (Team Leader)
Wayne Cass
James Falahee
Mark Mailloux

Charges Two/Five Workgroup
Mark Mailloux (Team Leader)
Connie Cronin
Michele Ciokajlo
Robert Meeker
Mary Zuckerman

<u>Charge Three Workgroup</u>
Michael LaPenna (Team Leader)
Donald Hirt

Patrick O'Donovan

Charges Four/Six Workgroup
Robert Asmussen (Team Leader)
Barton Buxton
Dr. Douglas Edema
Patrick O'Donovan
William Rietscha
Mary Zuckerman
Elizabeth Palazzolo

Charge One.

Motion by Ms. Zuckerman, seconded by Mr. Buxton, to exclude the VA Hospitals from the data set. Discussion followed. Motion Failed.

Motion by Mr. Mailloux, seconded by Mr. Steiger, to continue to utilize the Department's current handling of the VA Hospitals and the in/out of State migration. Motion Carried.

VIII. Next Step.

The workgroups will work on the each charge item and report back to the Committee.

IX. Future Meetings:

March 29, 2006 April 19, 2006 May 23, 2006 June 28, 2006 July 28, 2006 August 22, 2006

X. Public Comment.

None.

XI. Adjournment.

Motion by Mr. Meeker, seconded by Mr. Mailloux, to adjourn the meeting at 12:35 p.m. Motion Carried.

HOSPITAL BEDS

STANDARD ADVISORY COMMITTEE (SAC) CHARGE

APPROVED BY THE CON COMMISSION ON SEPTEMBER 13, 2005

The Hospital Beds SAC has been charged to review and recommend changes to the Hospital Beds standards as follows:

- 1. Through the data resource help of the MSU Department of Geography, determine whether or not the capacity at existing hospitals is sufficient to serve the population of those areas.
- 2. Review the high usage (occupancy) standards for adult, pediatric, ob/gyn and rehabilitation beds in the acute care setting.
- Consider the use of the comparative review criteria developed for limited access areas as a foundation for development of comparative review criteria for any hospital beds under review.
- 4. Review the current replacement zone for existing hospitals considering the replacement of aging physical plants.
- 5. Consider the level of occupancy and the fluctuations over time as related to the bed need methodology.
- 6. Consider multiple site licenses under common ownership as appropriate.